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STUDIES

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THE ASSOCIATION OF MEDICAID WITH THE DELIVERY OF SERVICES FOR CHILDREN WITH OR AT RISK FOR DEVELOPMENTAL DELAY

by

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ABSTRACT

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This study examines the need for and use of early intervention services among families and their young children with or at risk for developmental delay. The study population included newborns to 3-year olds who were active in North Carolina's Child Service Coordination Program (CSC) between January and June of 1992. The need for service was defined by the type of referrals, or service needs, identified at initial registration. Use of service was defined by the number of referrals which were known to be met by the second contact with the family. Medicaid eligibility was introduced as a descriptive variable to delineate two populations based upon economic differences. It was assumed that the use of services would be similar in both populations.

Among Medicaid-eligible participants, 27 percent were in need of basic living services, such as transportation, while only 14 percent of non-Medicaid participants were identified with such needs. Conversely, 24 percent of non-Medicaid children were found to be in need of assessment services, such as vision or hearing evaluations, compared to 14 percent of Medicaid-eligible children. With regard to specific services most likely to be met, 46 percent of all financial referrals were met among the Medicaid group, and 39 percent of all therapeutic referrals were met among the non-Medicaid group.

No difference was found in the average number of referrals needed between black and white participants. Chi-square statistics revealed that Medicaid status alone was not associated with a significant difference in the proportion of referrals met. However, when examining differences by race, the proportion of referrals met among Medicaid-eligible blacks was greater than that among non-Medicaid blacks, while such differences were not evident among white participants. These findings suggest that the need for services varies according to Medicaid status and that Medicaid may be an important determinant in the delivery of early intervention services for minorities.

